follow-up steps taken by his Ministry to cure the multi-faceted diseases discovered at the time of surprise check by them in the casualty section of the Safdarjung Hospital recently?

THE MINISTER OF STATE OF THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI DALIT EZHILMALAI): Corrective steps taken by the Medical Superintendent, Safdarjung Hospital include:—

(a) Barbed wire in front of Casualty is being replaced with an Iron Grill;

(b) Trolleys have now been kept free for the use of patients;

(c) Condemnation of unserviceable items/ vehicles is in process;

(d) Construction of covered shed for parking Hospital Vehicles is in process;

(e) CPWD has been asked to clear all rubble, maintain all toilets, keep drainage lines clean, prevent collection of water from their plants, clear sewer blockages, remove all drooping telephone/electrical wires and fix them properly, and proper maintainance of all taps/coolers/lights;

(f) NDMC has been asked to clear non-hazardous Hospital Waste daily; and

(g) NDMC has been requested to restore full water supply.

Poor health services in Rural Areas of the North-Eastern States

330. DR. B.B. DUTTA: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government are aware of the poor health services in rural areas of the North Eastern States;

(b) if so, the specific programmes drawn up by Government to provide adequate health services in the rural areas especially in the tribal areas of the North Eastern States; and

(c) the details thereof?

THE MINISTER OF STATE OF THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI DALIT EZHILMALAI): (a) Yes.Sir.Govemmentisawareofsomegaps in Rural Health infrastructure and manpower deployment in the North-Eastern States.

(b) and (c) Through the recently launched RCH Programme, specific programmes are being initiated in most of the North-Eastern States for (i) augmenting primary health infrastructure (ii) improving and expanding facilities for training local youths as ANMs/ Nurses; (iii) providing for contractual appointment of Medical and Para-Medical Staff for filling up vacancies (iv) involving NGOs in providing Medical Care to the people through trained health functionaries recruited from the local youth.

Various externally aided projects and Area Projects have been sanctioned for the North-Eastern States including Assam for bridging the infrastructural gaps in the Health Care System and improving the delivery of Rural Health Services through trained additional manpower.

Kidney racket in Country

331. SHRIMATI KAMLA SINHA:
SHRI S.M. KRISHNA:

Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether his Ministry has the records of approximate number of patients requiring kidney transplantation in the country; if so, the details including availability thereof;

(b) whether his Ministry are aware of the kidney racket busted in different parts of the country particularly in NOIDA, Delhi, Ranchi etc., if so, the reaction thereof;

(c) whether the Human Organ Transplantation Act is not applicable in certain States of the country; if so, the reasons therefor; and

(d) the stringent steps being taken by All States within the ambit of the Act and the amendments proposed within the Act?

THE MINISTER OF STATE OF THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI DALIT EZHILMALAI): (a) No such Records are maintained by the Govt. However, as per information received from the AIIMS, 99 patients are on their waiting list and about 30-40 thousand patients of chronic kidney failure need transplantation every year in India.

(b) to (d) Yes, Sir. The Transplantation of Human Organ Act was passed by the Parliament